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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 500.35669CX2

First Inventor or Application Identifier Yoshinori NAKAYAMA

Title See 1 in Addendum

Express Mail Label No. \_\_\_\_\_

U.S. PTO

03/28/01

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Specification [Total Pages 17]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3.  Drawing(s) (35 U.S.C. 113) [Total Sheets 8]
4. Oath or Declaration [Total Pages 2]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
    - i.  DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

\* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

5.  Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a.  Computer Readable Copy
  - b.  Paper Copy (identical to computer copy)
  - c.  Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

7.  Assignment Papers (cover sheet & document(s))
8.  37 C.F.R. § 3.73(b) Statement  Power of (when there is an assignee)  Attorney
9.  English Translation Document (if applicable)
10.  Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
11.  Preliminary Amendment
12.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
13.  \* Small Entity Statement(s)  Statement filed in prior application (PTO/SB/09-12)  Status still proper and desired
14.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15.  Other: Credit Card Payment Form

16. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation    Divisional    Continuation-in-part (CIP)   of prior application No. 09/379,404

Prior application information: Examiner N. Nguyen      Group / Art Unit. 2764

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

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|-------------------|-------------|-----------------------------------|--------|
| Name (Print/Type) | Hung H. Bui | Registration No. (Attorney/Agent) | 40,415 |
| Signature         | Hung H. Bui | Date                              |        |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

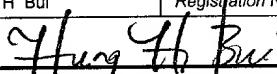
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 710)

| Complete if Known    |                  |
|----------------------|------------------|
| Application Number   | Not yet assigned |
| Filing Date          | March 28, 2001   |
| First Named Inventor | Y. NAKAYAMA      |
| Examiner Name        | N. Nguyen        |
| Group / Art Unit     | 2764             |
| Attorney Docket No.  | 500.35669CX2     |

| METHOD OF PAYMENT (check one)   |                       |                       |  |                        | FEE CALCULATION (continued)   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
|---|-----------------------|-----------------------|--|------------------------|---|----------------|----------|--|--|-----------------------|-----------------------|-----------------------|-----------------|-----------------|--------------|----------------|----------|--------------------|-------------------------------------|-----|--------------------|------|-----|-----|--|--------------------|-----|-------------------|-----|-----|---------------------------|-----|-----|-----|------------------|-----|--|-----|-----|-----|------|--------------------|--|--|-----|-----|--------|-----|---|--|--|-----|-----|-----|--|--|--|-----|-----|-----|---|--|--|-----|-----|-----|--|--|--|-----|-------|-----|---|--|--|-----|-------|-----|--|--|--|-----|-----|-----|------------------|--|--|-----|-----|-----|--|--|--|-----|-----|-----|--------------------------|--|--|-----|-------|-----|---|--|--|-----|-----|-----|----------------------------------|--|--|-----|-------|-----|------------------------------------|--|--|-----|-------|-----|--------------------------------|--|--|-----|-----|-----|------------------|--|--|-----|-----|-----|-----------------|--|--|-----|-----|-----|-------------------------------|--|--|-----|-----|-----|---|--|--|-----|-----|-----|---|--|--|-----|----|-----|--|--|--|-----|-----|-----|---|--|--|-----|-----|-----|--|--|--|-----|-----|-----|---|--|--|-----|-----|-----|---|--|--|---------------------|--|--|--|--|--|-----------------------------------|--|--|--|--|---------------------|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 01-2135</p> <p>Deposit Account Name: Antonelli, Terry, Stout &amp; Kraus, LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>   |                       |                       |  |                        | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td colspan="2">Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td colspan="2">Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td colspan="2">Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td colspan="2">For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td colspan="2">Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td colspan="2">Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td colspan="2">Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>390</td><td>216</td><td colspan="2">Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>217</td><td colspan="2">Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td colspan="2">Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td colspan="2">Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td colspan="2">Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td colspan="2">Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td colspan="2">Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td colspan="2">Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td colspan="2">Petition to revive – unavoidable</td><td></td></tr> <tr><td>141</td><td>1,240</td><td>241</td><td colspan="2">Petition to revive – unintentional</td><td></td></tr> <tr><td>142</td><td>1,240</td><td>242</td><td colspan="2">Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>440</td><td>243</td><td colspan="2">Design issue fee</td><td></td></tr> <tr><td>144</td><td>600</td><td>244</td><td colspan="2">Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td colspan="2">Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>130</td><td>123</td><td colspan="2">Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td colspan="2">Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td colspan="2">Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>710</td><td>246</td><td colspan="2">Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149</td><td>710</td><td>249</td><td colspan="2">For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>179</td><td>710</td><td>279</td><td colspan="2">Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td colspan="2">Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="5">Other fee (specify)</td> <td></td> </tr> <tr> <td colspan="5">*Reduced by Basic Filing Fee Paid</td> <td>SUBTOTAL (3) (\$ 0)</td> </tr> </tbody> </table> |                |          |  |  | Fee Code              | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description |                 | Fee Paid     | 105            | 130      | 205                | Surcharge - late filing fee or oath |     |                    | 127  | 50  | 227 | Surcharge - late provisional filing fee or cover sheet |                    |     | 139               | 130 | 139 | Non-English specification |     |     | 147 | 2,520            | 147 | For filing a request for reexamination |     |     | 112 | 920* | 112                | Requesting publication of SIR prior to Examiner action |  |     | 113 | 1,840* | 113 | Requesting publication of SIR after Examiner action |  |  | 115 | 110 | 215 | Extension for reply within first month |  |  | 116 | 390 | 216 | Extension for reply within second month |  |  | 117 | 890 | 217 | Extension for reply within third month |  |  | 118 | 1,390 | 218 | Extension for reply within fourth month |  |  | 128 | 1,890 | 228 | Extension for reply within fifth month |  |  | 119 | 310 | 219 | Notice of Appeal |  |  | 120 | 310 | 220 | Filing a brief in support of an appeal |  |  | 121 | 270 | 221 | Request for oral hearing |  |  | 138 | 1,510 | 138 | Petition to institute a public use proceeding |  |  | 140 | 110 | 240 | Petition to revive – unavoidable |  |  | 141 | 1,240 | 241 | Petition to revive – unintentional |  |  | 142 | 1,240 | 242 | Utility issue fee (or reissue) |  |  | 143 | 440 | 243 | Design issue fee |  |  | 144 | 600 | 244 | Plant issue fee |  |  | 122 | 130 | 122 | Petitions to the Commissioner |  |  | 123 | 130 | 123 | Petitions related to provisional applications |  |  | 126 | 180 | 126 | Submission of Information Disclosure Stmt |  |  | 581 | 40 | 581 | Recording each patent assignment per property (times number of properties) |  |  | 146 | 710 | 246 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  |  | 149 | 710 | 249 | For each additional invention to be examined (37 CFR § 1.129(b)) |  |  | 179 | 710 | 279 | Request for Continued Examination (RCE) |  |  | 169 | 900 | 169 | Request for expedited examination of a design application |  |  | Other fee (specify) |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  |  | SUBTOTAL (3) (\$ 0) |
| Fee Code  | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description  |                        | Fee Paid  |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 105   | 130                   | 205                   | Surcharge - late filing fee or oath  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 127   | 50                    | 227                   | Surcharge - late provisional filing fee or cover sheet                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 139   | 130                   | 139                   | Non-English specification  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 147   | 2,520                 | 147                   | For filing a request for reexamination                                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 112   | 920*                  | 112                   | Requesting publication of SIR prior to Examiner action                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 113   | 1,840*                | 113                   | Requesting publication of SIR after Examiner action                        |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 115   | 110                   | 215                   | Extension for reply within first month                                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 116   | 390                   | 216                   | Extension for reply within second month                                    |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 117   | 890                   | 217                   | Extension for reply within third month                                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 118   | 1,390                 | 218                   | Extension for reply within fourth month                                    |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 128   | 1,890                 | 228                   | Extension for reply within fifth month                                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 119   | 310                   | 219                   | Notice of Appeal   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 120   | 310                   | 220                   | Filing a brief in support of an appeal                                     |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 121   | 270                   | 221                   | Request for oral hearing   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 138   | 1,510                 | 138                   | Petition to institute a public use proceeding                              |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 140   | 110                   | 240                   | Petition to revive – unavoidable   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 141   | 1,240                 | 241                   | Petition to revive – unintentional   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 142   | 1,240                 | 242                   | Utility issue fee (or reissue)   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 143   | 440                   | 243                   | Design issue fee   |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 144   | 600                   | 244                   | Plant issue fee  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 122   | 130                   | 122                   | Petitions to the Commissioner  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 123   | 130                   | 123                   | Petitions related to provisional applications                              |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 126   | 180                   | 126                   | Submission of Information Disclosure Stmt                                  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 581   | 40                    | 581                   | Recording each patent assignment per property (times number of properties) |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 146   | 710                   | 246                   | Filing a submission after final rejection (37 CFR § 1.129(a))              |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 149   | 710                   | 249                   | For each additional invention to be examined (37 CFR § 1.129(b))           |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 179   | 710                   | 279                   | Request for Continued Examination (RCE)                                    |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 169   | 900                   | 169                   | Request for expedited examination of a design application                  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| Other fee (specify)   |                       |                       |  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| *Reduced by Basic Filing Fee Paid   |                       |                       |  |                        | SUBTOTAL (3) (\$ 0)   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| <p>2. Payment Enclosed:</p> <p><input type="checkbox"/> Check    <input checked="" type="checkbox"/> Credit card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>  |                       |                       |  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| FEE CALCULATION   |                       |                       |  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| <p>1. BASIC FILING FEE</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Fee (\$)</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>201</td><td>355</td><td colspan="2">Utility filing fee</td><td>710</td></tr> <tr><td>106</td><td>320</td><td>206</td><td>160</td><td colspan="2">Design filing fee</td><td></td></tr> <tr><td>107</td><td>490</td><td>207</td><td>245</td><td colspan="2">Plant filing fee</td><td></td></tr> <tr><td>108</td><td>710</td><td>208</td><td>355</td><td colspan="2">Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td colspan="2">Provisional filing fee</td><td></td></tr> </tbody> </table> |                       |                       |  |                        |   |                |          |  |  | Large Entity Fee Code | Fee (\$)              | Small Entity Fee Code | Fee (\$)        | Fee Description |              | Fee Paid       | 101      | 710                | 201                                 | 355 | Utility filing fee |      | 710 | 106 | 320  | 206                | 160 | Design filing fee |     |     | 107                       | 490 | 207 | 245 | Plant filing fee |     |  | 108 | 710 | 208 | 355  | Reissue filing fee |  |  | 114 | 150 | 214    | 75  | Provisional filing fee                              |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| Large Entity Fee Code   | Fee (\$)              | Small Entity Fee Code | Fee (\$)   | Fee Description        |   | Fee Paid       |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 101   | 710                   | 201                   | 355  | Utility filing fee     |   | 710            |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 106   | 320                   | 206                   | 160  | Design filing fee      |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 107   | 490                   | 207                   | 245  | Plant filing fee       |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 108   | 710                   | 208                   | 355  | Reissue filing fee     |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| 114   | 150                   | 214                   | 75   | Provisional filing fee |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| <p>SUBTOTAL (1) (\$ 710)</p>  |                       |                       |  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| <p>2. EXTRA CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>-20</th> <th>= 0</th> <th>X 18</th> <th>= 0</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>1</td> <td>-4</td> <td>= 0</td> <td>X 80</td> <td>= 0</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>X 0</td> <td>= 0</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>   |                       |                       |  |                        |   |                |          |  |  | Total Claims          | -20                   | = 0                   | X 18            | = 0             | Extra Claims | Fee from below | Fee Paid | Independent Claims | 1                                   | -4  | = 0                | X 80 | = 0 |     |  | Multiple Dependent |     |                   | X 0 | = 0 |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| Total Claims  | -20                   | = 0                   | X 18   | = 0                    | Extra Claims  | Fee from below | Fee Paid |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| Independent Claims  | 1                     | -4                    | = 0  | X 80                   | = 0   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| Multiple Dependent  |                       |                       | X 0  | = 0                    |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |
| <p>SUBTOTAL (2) (\$ 0)</p>  |                       |                       |  |                        |   |                |          |  |  |                       |                       |                       |                 |                 |              |                |          |                    |                                     |     |                    |      |     |     |  |                    |     |                   |     |     |                           |     |     |     |                  |     |  |     |     |     |      |                    |  |  |     |     |        |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |       |     |   |  |  |     |       |     |  |  |  |     |     |     |                  |  |  |     |     |     |  |  |  |     |     |     |                          |  |  |     |       |     |   |  |  |     |     |     |                                  |  |  |     |       |     |                                    |  |  |     |       |     |                                |  |  |     |     |     |                  |  |  |     |     |     |                 |  |  |     |     |     |                               |  |  |     |     |     |   |  |  |     |     |     |   |  |  |     |    |     |  |  |  |     |     |     |   |  |  |     |     |     |  |  |  |     |     |     |   |  |  |     |     |     |   |  |  |                     |  |  |  |  |  |                                   |  |  |  |  |                     |

\*\*or number previously paid, if greater, For Reissues, see above

| SUBMITTED BY      |   | Complete (if applicable)         |        |           |                |
|-------------------|---|----------------------------------|--------|-----------|----------------|
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| Signature         |  |                                  |        | Date      | March 28, 2001 |

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Attachment to PTO/SB/05 (4/98) Utility Patent Application  
Transmittal

1. SCHEDULE RETRIEVAL METHOD FOR CONTROLLING SCHEDULES AND  
SCHEDULE SERVER APPARATUS WITH MULTISTAGEOUS IDLE-TIME  
RETRIEVAL MEANS